

STATEMENT OF ORGANIZATION

OFFICE USE ONLY

1. Name and Address of Committee

2. Date of this Statement

Louisiana Legislative
Leadership PAC
301 Delawnde St.
New Orleans LA 70114

1-3-15

3. Estimated Membership

4. Amended Statement?

Check If:

New Committee

Monthly Filer

Yes ☒ No

PAC
S/O
1/6

89683
1026

15000096

5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)

a. Name

b. Position

c. Address

Ken Pickering Chairperson

KATHY HONAKER Treasurer

1515 Poydras St New Orleans LA 70112

301 Delawnde New Orleans LA 70114

6. Affiliated Organizations

(Any organization, other than a political committee, which directly or indirectly established, administers, or financially supports this committee.)

a. Name

b. Address

c. Relationship to Committee

7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.)

a. Name

b. Address

FIRST NBC

PO BOX 61035 New Orleans LA 70161

8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Check one: ☒ Principal Campaign Committee ☐ Subsidiary Committee

b. Name of Candidate

c. Office Sought by the Candidate

9. a. Name of Person Preparing Report

KATHY HONAKER

b. Daytime Telephone

504 481 9511

10. WE HEREBY CERTIFY that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge, information and belief.

This 3rd day of January 2015

Signature of Committee Chairperson

Daytime Telephone Number

Signature of Committee Treasurer, if any

Daytime Telephone Number